



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 1
FIVE POST OFFICE SQUARE -SUITE 100 (MAIL CODE OES05-1)
BOSTON, MASSACHUSETTS 02109-3912

URGENT MATTER -- PROMPT REPLY NECESSARY
CERTIFIED MAIL: RETURN RECEIPT REQUESTED

July 10, 2014

Mr. Robert Napolitano,
Regulatory and Technical Services Manager
Astro Chemicals, Inc.
126 Memorial Drive
Springfield, MA 01104

Re: **NOTICE OF VIOLATION** of the Resource Conservation and Recovery Act (RCRA), 42 U.S.C. § 6928, and Massachusetts General Laws, Chapter 21C, Sections 4 and 6 and the Land Disposal Restrictions Rule; Sections 3004(d) through (m) of RCRA, 42 U.S.C. §§ 6924(d) through (m).

Dear Mr. Napolitano:

On December 10-11, 2012, representatives of the United States Environmental Protection Agency (EPA) conducted compliance evaluation inspections (CEI) at the Astro Chemicals, Incorporated ("Astro") located in Springfield, MA. These facilities are identified by EPA ID # MAC300007937 and MAD048666465. The purpose of these inspections was to determine Astro's compliance with Massachusetts Hazardous Waste Regulations 310 CMR 30.00 and the federal Hazardous Waste Management Regulations found at 40 CFR Parts 260-272. The State of Massachusetts has been granted final authorization by EPA to administer certain portions of RCRA.

As a result of this inspection, EPA has determined that Astro violated certain provisions of the Massachusetts Hazardous Waste Regulations 310 CMR 30.00 and the RCRA regulations, promulgated at 40 CFR Parts 260 through 272. The specific violations are set forth below:

1. Failure to adequately conduct weekly inspections of hazardous waste storage areas, as required by Massachusetts regulations at 310 CMR 30.686. At the time of the inspection, Astro had not completed weekly inspection logs for the following periods:

8/23/12 to 9/7/12;
6/15/12 to 6/29/12;
4/11/11 to 4/25/11;
5/27/11 to 6/13/11;
7/22/11 to 8/5/11;
8/17/11 to 9/9/11;
9/15/11 to 9/26/11;

9/26/11 to 10/6/11;
10/14/11 to 10/27/11;
12/14/11 to 12/23/11;
7/14/10 to 7/23/10;
12/6/10 to 12/23/10;
3/15/10 to 3/26/10;
4/5/10 to 4/15/10;
1/18/09 to 1/28/09; and
7/21/09 to 8/5/09.

2. Failure to conduct hazardous waste determinations, as required by 310 CMR 30.302. Specifically the inspection team observed the following:

a. During the inspection, Robert Napolitano, Regulatory and Technical Services Manager (RN), stated that neutral acid-base titrations are conducted in Astro's Memorial Drive Laboratory, and that small amounts of the waste from the titrations are discharged into the drain in the laboratory. RN stated that Astro had never conducted a hazardous waste determination on this waste stream prior to disposal into Astro's sink, which ultimately discharges to the local POTW; and

b. The inspection team observed two pallets at the Shaw's Lane facility, identified by RN as samples he needs to evaluate to determine if they need to be retained, or if they can be disposed. RN stated that all of the spent samples from the operation are treated in Astro's elementary neutralization system. Furthermore, RN stated that he was not aware of any hazardous waste determinations having been conducted on spent samples, prior to on-site treatment.

3. Failure to close containers of hazardous waste, unless actively adding or removing waste from the container, as required by 310 CMR 30.685(1). Specifically, at the time of the inspection, the inspection team observed the following open hazardous waste containers at the Memorial Drive facility:

a. one 55-gallon drum marked as hazardous waste, 12/3/12, flammable rags, located at the flammable satellite accumulation area. The top of this container was not secured. This container was being secured by grounding clamps, and not the proper snap-lid retaining mechanism; and

b. one 55-gallon container marked as hazardous waste, flammable liquids, located at the flammable satellite accumulation area. This container was equipped with a funnel with a closed lid, but the lid was not properly equipped with an appropriate gasket to minimize volatile emissions from releasing from the container. A strong VOC odor was noticeable in the vicinity of this container.

4. Failure to label the following containers of hazardous waste with the words "hazardous waste", words identifying the contents of the container, and the type of hazard(s) associated with

the waste(s) indicated in words (e.g., toxic, ignitable.....), as required by 310 CMR 30.340(1)(b)1, 2, & 3:

a. The following containers located at the Memorial Drive Laboratory:

- i. one approximately 1/2-gallon container marked only as "waste". The chemist in the area described the contents as titration wastes that are managed as hazardous waste;
- ii. one red safety can marked only as hazardous waste;
- iii. one approximately 250-ml container marked only as "KMNO₃ waste". The chemist also stated that the contents would be managed as hazardous waste; and
- iv. one 500-ml container identified by RN as accumulating spent solvent-based titration wastes that are managed as hazardous waste.

b. The following container located at the Memorial Drive Quarantine Area:

- i. one 55-gallon drum marked with an Eastern Color and Chemical Company (ECC) label, and with the word "scour". RN stated that Astro sold ECC an ingredient in this product, and that ECC later argued that the product provided by Astro was a bad material that contaminated ECC's product. RN stated that the content in the drum could not be simply re-worked, and stated that it was a disagreement between Astro and ECC, but it was in the interest of customer satisfaction that Astro, accepted the material back. Inspector Meyer questioned why the material was not being managed as a waste if Astro could not simply re-work it into their future production runs and RN acknowledged that the container was not the typical material held in Astro's quarantine area, and agreed that it would need to be managed as waste since it won't be able to be re-used.

c. The following container located at the Memorial Drive Main Hazardous Waste Storage Area:

- i. one unlabeled 55-gallon container. This container was labeled and dated by RN during the inspection after it was pointed out to RN by the inspection team. RN labeled the container as hazardous waste, xylanol.

5. Failure to mark accumulation dates on the following containers located at the Memorial Drive facility, as required by 310 CMR 30.340(1)(b)4:

a. The following container located at the Memorial Drive Main Hazardous Waste Storage Area:

- i. one unlabeled 55-gallon container. This container was labeled and dated by RN during the inspection after it was pointed out to RN by the inspection team. RN labeled the container as hazardous waste, xylanol and dated the container 12/10/12.

b. The following container located at the Memorial Drive Quarantine Area:

i. one 55-gallon drum marked with an ECC label, and with the word "scour". RN acknowledged that the container was not the typical material held in Astro's quarantine area, and agreed that it would need to be managed as waste since it won't be able to be re-used in production.

6. Failure to adequately train personnel with hazardous waste management responsibilities, in violation of 310 CMR 30.516(1). Specifically, during the inspection, RN referred the inspection team to Astro's "One Plan" as the source of a training plan. The reviewed plan did not have a list of employees with hazardous waste management responsibilities and only listed one job title as having hazardous waste management responsibilities (Filling Room Manager). RN stated that the Filling Room Manager job is filled by Gerry Pouliot, but during the in-briefing, RN also described the following people as having hazardous waste management responsibilities:

Sal Teles;
Ozzie Rodriguez;
Bill McEwen;
Kathy Kruzel (Lab); and
Allison Paloski (Chemist).

Additionally, during the inspection, the inspection team identified Don Garceau and Tom Bromley as having contingency plan implementation responsibilities, along with RN, who serves as Astro's primary emergency coordinator and the primary employee that signs Astro's hazardous waste manifests.

After discussions with RN, and reviewing provided training documentation, the inspection team concluded that no hazardous waste training had been provided to Astro's employees. RN explained that Astro is in the business of hazardous materials, and therefore has focused all of their training on the hazardous material management, and not on hazardous waste management. RN was not able to provide the inspection team with any hazardous waste training documentation more recent than 3/1/2009.

7. Failure to maintain adequate training records for each employee managing hazardous waste, in violation of 310 CMR 30.516(2). See explanation above in section V.5.

8. Failure to maintain an adequate facility contingency plan, as required by 310 CMR 30.521. Specifically, the contingency plan was deficient in the following areas:

a. Astro did not have any record of submitting copies of the contingency plan to those who may be called upon to respond or treat affected people in the event of an incident. The only record of submittal of the plan was a letter dated in August, 2000 to James Controvich, Office of Emergency Preparedness, but nothing more current. RN stated that he knows that he has submitted more current versions of Astro's contingency plan to Mr. Controvich, but was unable to find documentation of more recent submittals. RN stated that in the past he has sent Mr.

Controvich three copies of the plan and has relied on him to submit the plan to necessary responders. RN stated that copies have not been submitted to local hospitals that may be called upon in the event of an incident;

b. The plan stated that arrangements have been made with local hospitals, but RN acknowledged that the language was boiler plate, and in fact, no arrangements have been made with local hospitals;

c. Page 20 of 41 refers to a section 4.4 for list of spill contractors and Licensed Site Professionals, but the plan did not have a section 4.4; and

d. Annex 5 describes hazardous waste training of Astro's employees, but does not reflect the actual training in practice at the time, and for the three year period reviewed during the inspection. (Astro had not conducted hazardous waste training during the three year time period reviewed).

9. Failure to post a "no smoking" sign at the main hazardous waste storage area where Astro stores ignitable hazardous waste, as required by 310 CMR 30.560(2).

ASTRO IS HEREBY REQUIRED TO:

A. Immediately upon receipt of this NOTICE:

1. As required by 310 CMR 30.302, conduct hazardous waste determinations on every waste stream, at the time that the waste is generated.
2. As required by 310 30.686, conduct weekly inspections at each hazardous waste storage areas, and document completed inspections in a log.
3. As required by 310 CMR 30.685(1), close containers of hazardous waste at all times, unless actively adding, or removing waste from the container.
4. As required by 310 CMR 30.340(1)(b)1, 2, & 3, label containers of hazardous waste with the words "hazardous waste", words identifying the contents of the container, and the type of hazard(s) associated with the waste(s) indicated in words (e.g., toxic, ignitable.....).
5. As required by 310 CMR 30.340(1)(b)4, mark each container of hazardous waste with the beginning accumulation date.
6. As required by 310 CMR 30.560(2), post a "no smoking" sign at the main hazardous waste storage area where Astro stores ignitable hazardous waste, and any other area where ignitable hazardous waste is accumulated and/or stored.

B. Within thirty (30) calendar days of receipt of this NOTICE:

1. As required by 310 CMR 30.516(1)(d), adequately train all personnel with hazardous waste management responsibilities. The type and amount of training provided to these personnel must be sufficient to ensure that the employee has the skills and knowledge to safely and effectively complete their hazardous waste management duties.
2. As required by 310 CMR 30.516(2), develop and maintain a hazardous waste training plan, and maintain training records for each employee with hazardous waste management responsibilities.
3. As required by 310 30.521, develop and maintain a complete, and detailed facility contingency plan.

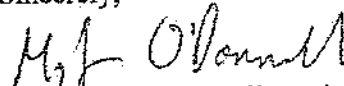
C. Within thirty-five (35) calendar days of receipt of this NOTICE:

1. Submit a written description, with supporting documentation, including any newly implemented waste determination/profiling procedures to:

Andrew Meyer, Environmental Scientist
U.S. Environmental Protection Agency
5 Post Office Square, Boston, MA 02109-3912

Failure to correct the violations as required by this NOTICE may subject the facility to further Federal enforcement action, including an assessment of penalties, pursuant to Section 3008 of RCRA, 42 U.S.C. § 6928. If you have any questions regarding this NOTICE, please contact Andrew Meyer of the RCRA Compliance Unit, at (617) 918-1755.

Sincerely,


Mary Jane O'Donnell, Acting Manager
RCRA, EPCRA and Federal Programs Unit

cc: Saadi Motamedi, MassDEP, WERO
RCRA File